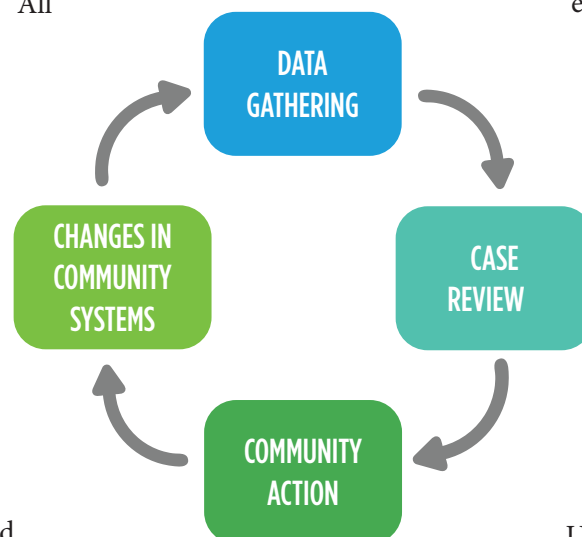


FETAL AND INFANT MORTALITY REVIEW PROGRAM 2021 ANNUAL REPORT

ABOUT THE FETAL AND INFANT MORTALITY REVIEW PROGRAM

Fetal and Infant Mortality Review (FIMR) is a community-based, action-oriented process to review fetal and infant deaths and make recommendations to spark systemic changes to prevent future similar deaths. All FIMR teams operate at the local level (usually the county) to examine medical, non-medical, and systems-related factors and circumstances contributing to fetal and infant deaths.

Among the various types of fatality reviews, the FIMR approach is unique because cases are de-identified; they may include a family interview to determine the family's perspective on factors that may have contributed to the infant's life and death; and many of the teams have a Community Action Group (CAG) that, after completion of the review, works to take the case review team's recommendations to action.

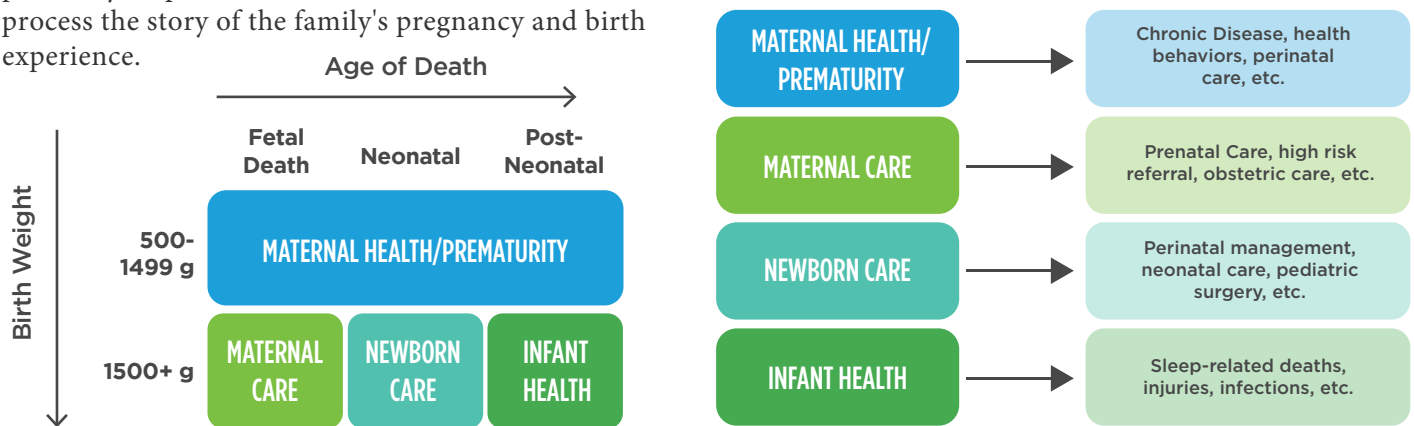


The purpose of FIMR's Case Review team is to conduct comprehensive multidisciplinary review of fetal and infant deaths to understand how a wide array of local social, economic, public health, educational, environmental and safety issues relate to the tragedy of infant loss; and use the findings to take action that can prevent other infant death and to improve the systems of care and resources for women, infants and families.

Fetal and infant mortality are important indicators of the health of a community. Fetal and infant deaths are sentinel events that illustrate system and resource issues. Understanding and addressing infant mortality in our community can be challenging, however it is one of the most important things that can be done to improve the overall health of our population.

In 2021, there were 124 fetal deaths and 107 infant deaths in Broward county. 28 cases were selected systematically using the Perinatal Period of Risk Process (PPOR). Of these: 19 infant deaths were selected, and 9 fetal deaths. Ten (10) maternal/family interviews were completed. These interviews positively impact the case review team to hear and process the story of the family's pregnancy and birth experience.

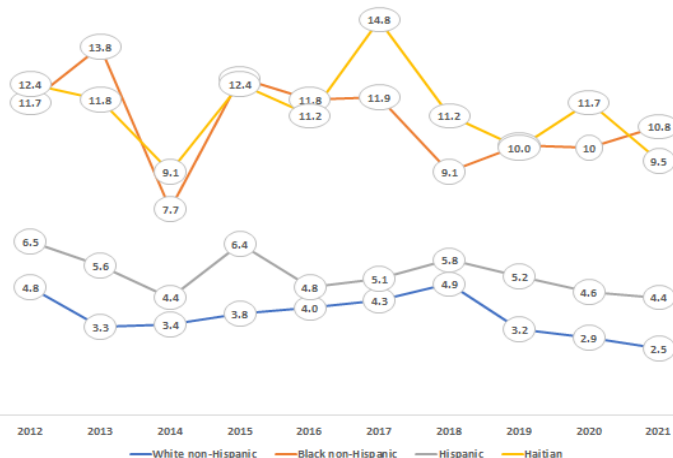
The PPOR process identifies groups and periods of risk with the most deaths and the highest rates. Each period of risk is associated with its own set of risks and prevention factors.



Over the past 10 years, the fetal and infant mortality data shows a persistent disparity between the white, Hispanic and their Black and Haitian counterparts in Broward County. This indicates that renewed efforts reflecting innovative strategies focusing on upstream factors must be applied to positively impact birth outcome rates.

Source: Florida Health Charts, Florida Department of Health, 2012-2021

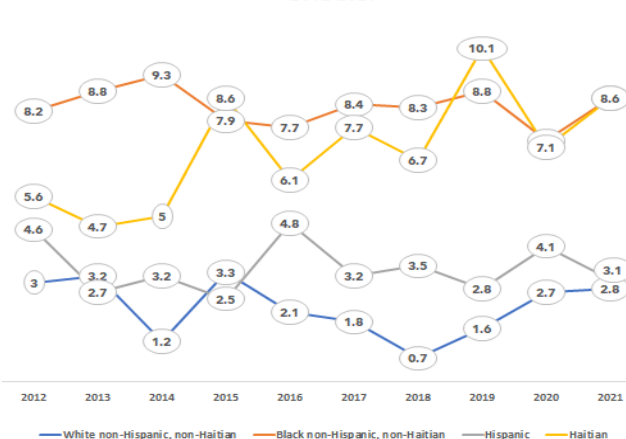
Fetal Mortality (Rate per 1,000 Deliveries) by Race and Ethnicity Broward County 2012-2021



Fetal Mortality in Broward County

Fetal mortality, or stillbirth, is the death of a fetus at 20 weeks or more of gestation. It results in a baby born without signs of life. The HP2030 goal for fetal mortality is 5.7 deaths per 1,000 deliveries.

Infant Mortality (Rate per 1,000 Live Births) by Race and Ethnicity Broward County 2012-2021

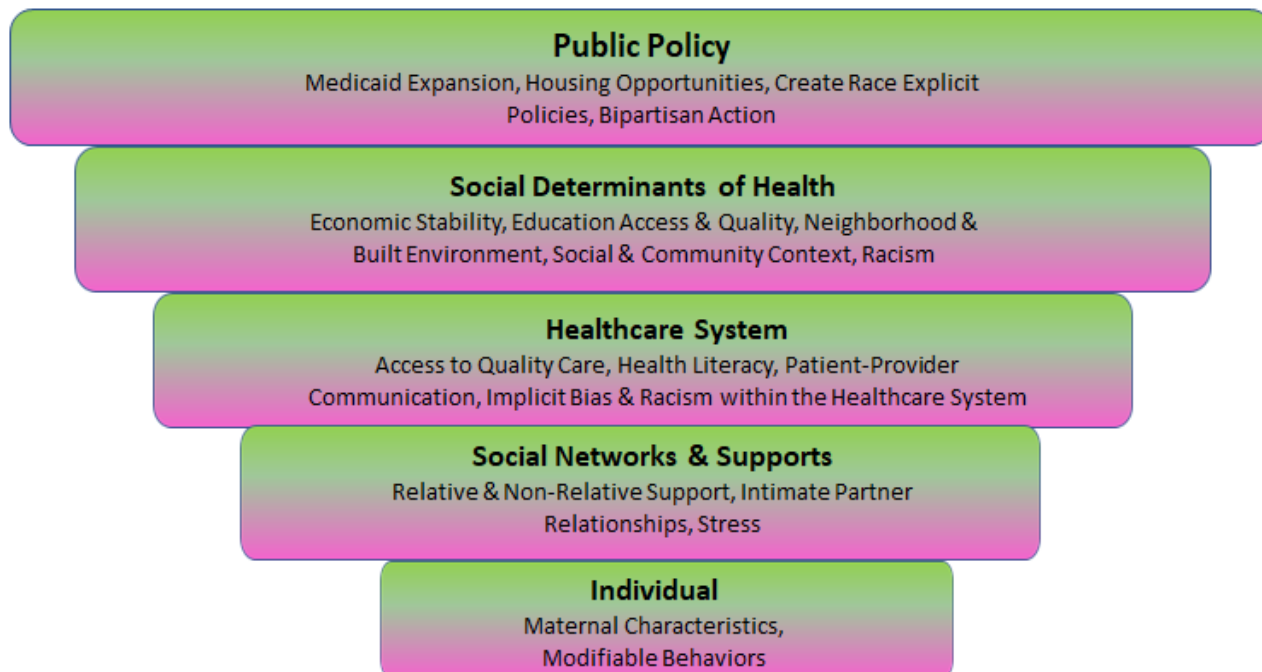


Infant Mortality in Broward County

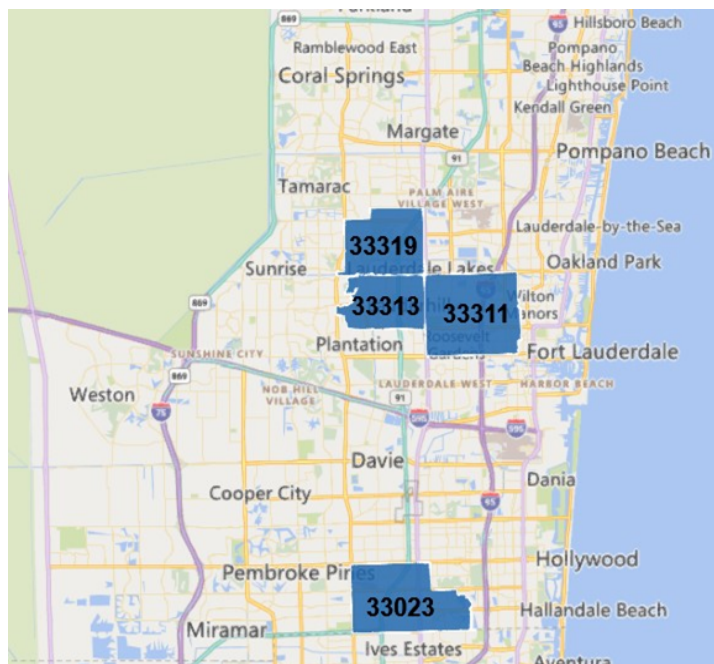
Infant mortality are deaths that occurred between 0 and 364 days from birth. The HP2030 goal for infant mortality is 5.0 deaths per 1,000 live births.

The 5-level Socio Ecological Model (SEM): Individuals, communities, and the impact of systems

Invested community stakeholders work to develop strategies that promote well-being and improve community health.



These 4 zip codes represent those with the highest rates and counts of fetal death, infant mortality, and preterm birth in 2021 in Broward County.



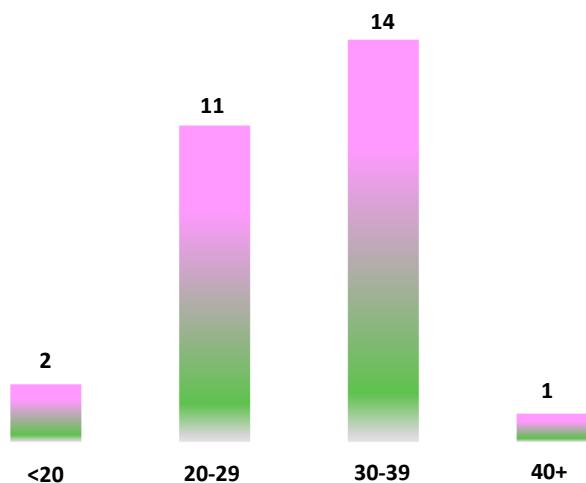
Zip Code	Fetal Mortality		Infant Mortality		Preterm Birth	
	Count	Rate	Count	Rate	Count	Rate
33023	5	6.4	9	12.0	100	12.8%
33311	11	11.0	12	11.8	158	16.0%
33313	12	13.9	8	9.0	128	15.1%
33319	5	8.3	5	8.7	75	12.6%

* Fetal Mortality rate is per 1,000 deliveries

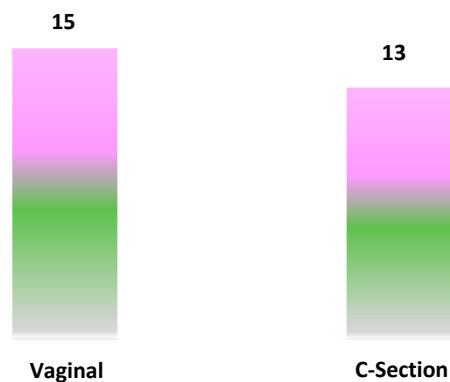
* Infant Mortality rate is per 1,000 live births

* Preterm Birth rate is percentage of births in zip code

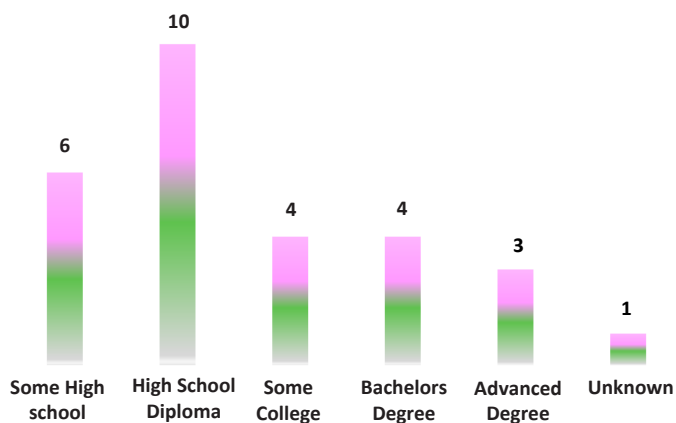
Age of Birthing Person



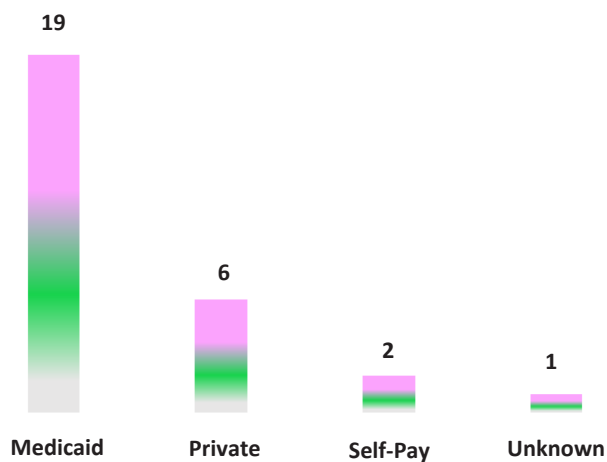
Method of Delivery



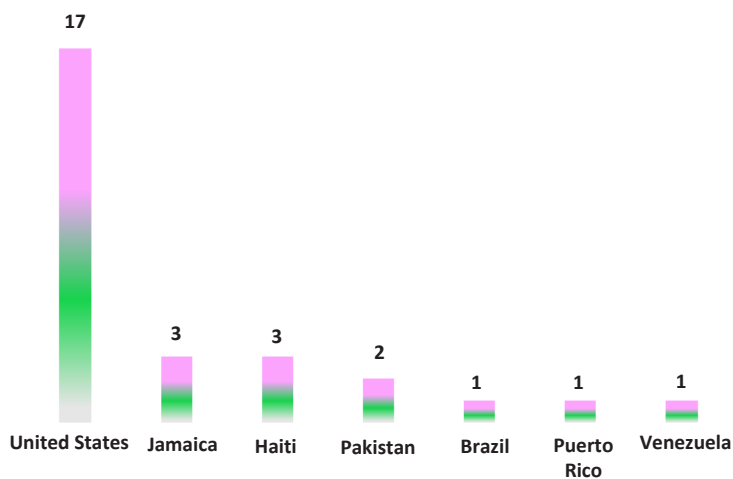
Education



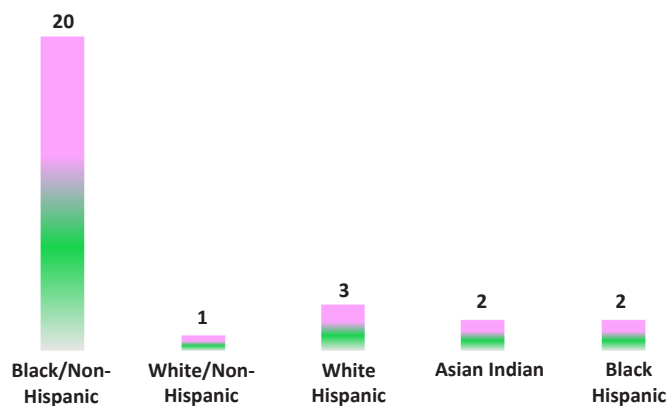
Insurance



Nativity



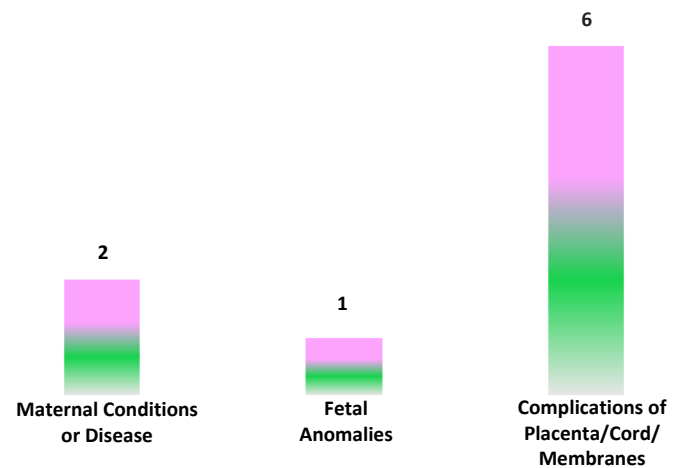
Race/Ethnicity



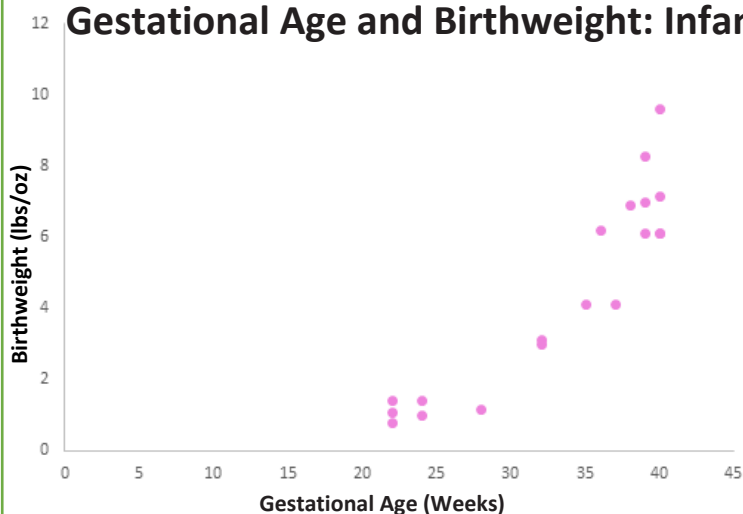
Gestational Age and Birthweight: Fetal



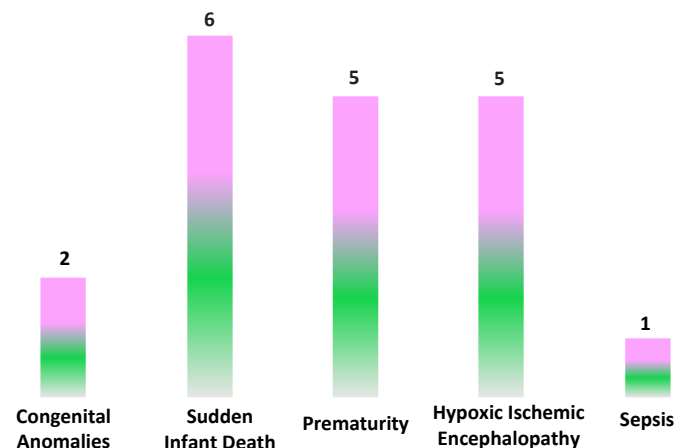
Cause of Death: Fetal



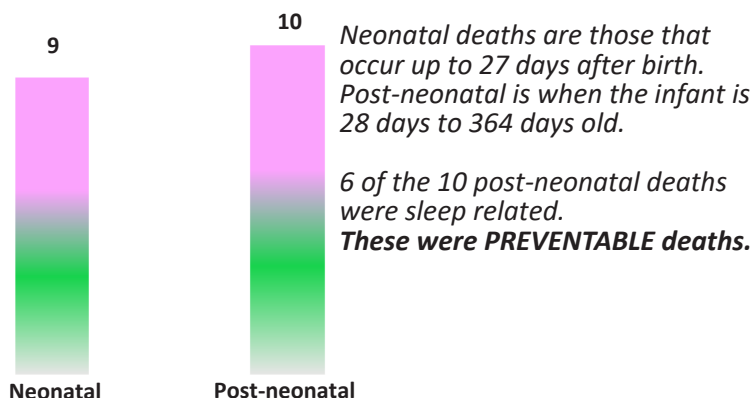
Gestational Age and Birthweight: Infant



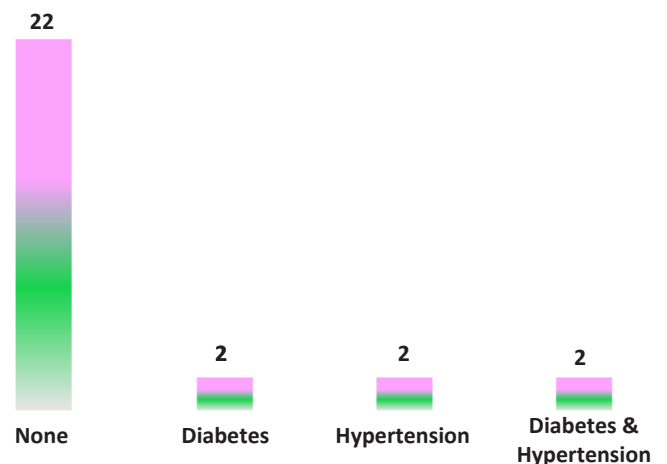
Cause of Death: Infant



Age of Infant at Death



Medical Conditions



RECOMMENDATIONS FROM THE CRT

- Complete Healthy Start risk screening for all patients. (Healthcare System)
- Improve effective communication from providers to patients. (Healthcare System)
- Educate about kick counts, especially in the third trimester, and when to seek medical attention. (Individual, Social Networks and Supports, Healthcare System)
- Educate healthcare providers on the importance of cultural humility, which includes listening to concerns and understanding cultural norms in decision-making. (Healthcare System, Social Networks and Supports)
- Educate healthcare providers on the importance of screening for substance use, mental health symptoms, and postpartum depression, and the provision of referrals if necessary. (Healthcare System)
- Promote the importance of early and adequate prenatal care. (Individual, Social Networks and Supports, Healthcare System, Social Determinants of Health, Public Policy)
- Engage immigration partners about provision of healthcare services and resources. (Healthcare System, Social Determinants of Health, Public Policy)
- Promote the importance of preconception and inter-pregnancy care. (Individual, Healthcare System, Social Networks and Supports)
- Educate caregivers and social support networks regarding American Academy of Pediatrics safe sleep recommendations. (Individual, Social Networks and Supports)
- Develop safe sleep messaging and campaigns that are culturally relevant and linguistically appropriate. (Individual, Social Networks and Supports, Healthcare System, Social Determinants of Health)
- Improve effective provider to provider communication. (Healthcare System)
- Emphasize the importance of thorough and detailed documentation in medical records. (Healthcare System)
- Increase access to quality interpreters in Haitian Creole, Spanish, and Portuguese. (Healthcare System, Public Policy)
- Offer bereavement referral to all families who experience loss. (Individual, Healthcare System)
- Ensure a person-centered approach to decision-making is used in healthcare practices. (Individual, Healthcare System)
- Provide ongoing chronic disease education to pregnant persons and their social support network. (Individual, Social Networks and Supports, Healthcare System)
- Identify challenges related to the social determinants of health (transportation, income, housing, insurance, childcare) that may prevent individuals from attending and receiving care. (Individual, Healthcare System, Social Determinants of Health, Public Policy)
- Improve access and referrals to specialists for people experiencing high risk pregnancies. (Healthcare System, Social Determinants of Health, Public Policy)
- Address the need for OBGYN providers in areas that are under resourced. (Healthcare System, Social Determinants of Health, Public Policy)
- Work with pregnant people to increase support system network; including doulas, home visiting and social work providers, and clergy. (Individual, Social Networks and Supports, Healthcare System)

CASE REVIEW TEAM MEMBERS

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The FIMR Program is funded by the Florida Department of Health and administered by Broward Healthy Start Coalition.

For more information on the FIMR Program visit us at www.browardhsc.org

